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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Syniverse Technologies, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P23873
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Legal Department
(Name of Person)
Syniverse Technologies, LLC
(Firm/Company)
8125 Highwoods Palm Way
(Address)
Tampa, FL 33647
(City/State and Zip code)
For further information concerning this matter, please call:
Billy Franchi at (813) 637-5746
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Syniverse Technologies, Inc.	
(Name of Corporation)	
P23873	
(Document Number of Corporation (if known)	n
Delaware San	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affairs within the State of Ploride and voluntarily surrenders its authority to transact business or conduct affairs in Florida.	hereby .
This corporation revokes the authority of its registered agent in Florida to accept service on its behappoints the Department of State as its agent for service of process based on a cause of action arising during it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	
8125 Highwoods Palm Way	
(Mailing Address)	
Tampa, FL 33647	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change in its mailing address	S.
(Signiture of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)	
David W. Hitchcock (Typed or printed name of person signing) Chief Financial Of Citle of person signing)	ficen_

FILING FEE \$35